POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		⁻/⁻/	1/=7/01
FORMALITY REVIEW	⊂⁻m	927	05(03(01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔ .... Rejected	N .... Non-elected
= .... Allowed	I .... Interference
— (Through numeral)... Canceled	A .... Appeal
÷ .... Restricted	O .... Objected

JC4(927)

BEST AVAILABLE COPY

Claim			Date
Final	Original		
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If more than 150 claims or 10 actions
staple additional sheet here

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